

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES
MEDICAID PURCHASING ADMINISTRATION
Olympia, Washington**

To: Durable Medical Equipment (DME) Providers
Pharmacists
Managed Care Organizations

Memo # : 10-89
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From: Doug Porter, Administrator and
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Authority/Medicaid Purchasing
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<http://hrsa.dshs.wa.gov/contact/default.aspx>

Subject: Wheelchairs, Durable Medical Equipment (DME), and Supplies: Fee Schedule, and Coverage Table Updates

Effective for dates of service on and after January 1, 2011, the Department of Social and Health Services (the Department) will:

- Update the Fee Schedule for *Wheelchairs, Durable Medical Equipment (DME), and Supplies* using the year 2011 Healthcare Common Procedural Coding System (HCPCS) Level II code additions and deletions as discussed in this memo; and
- Update the coverage tables in the current *Wheelchairs, Durable Medical Equipment (DME), and Supplies Billing Instructions*.

Overview

All previously published policies remain the same unless specifically identified as changed in this memo.

Fee Schedule Update

To view the updated *Wheelchairs, Durable Medical Equipment (DME), and Supplies Fee Schedule*, effective January 1, 2011, visit the Department/MPA online at:
<http://hrsa.dshs.wa.gov/RBRVS#D>.

Effective for dates of service on and after January 1, 2011, do not use CPT® and HCPCS codes or modifiers that were deleted in the “*Year 2011 CPT*” book and the “*Year 2011 HCPCS*” book.

Coverage Table Updates

Effective for dates of service on and after January 1, 2011, the Department will update the coverage tables in the current *Wheelchairs, Durable Medical Equipment (DME), and Supplies Billing Instructions*.

The Department will **add** the following procedure codes to the coverage table in the current *Wheelchairs, Durable Medical Equipment (DME), and Supplies Billing Instructions*:

Procedure Code	Description
A4566	Shoulder sling or vest design, abduction restrainer, with or without swathe
A9273	Hot water bottle, ice cap or collar, heat and/or cold wrap, any type
E1831	Static progressive stretch toe device, extension and/or flexion
E2622	Skin protection wheelchair seat cushion, adjustable, width less than 22 inches
E2623	Skin protection wheelchair seat cushion, adjustable, width 22 inches or greater
E2624	Skin protection and positioning wheelchair seat cushion, adjustable, width less than 22 inches
E2625	Skin protection and positioning wheelchair seat cushion, adjustable, width 22 inches or greater

The Department will **remove** the following procedure codes from the “Other Charges for DME” coverage table in the current *Wheelchairs, Durable Medical Equipment (DME), and Supplies Billing Instructions*:

Procedure Code	Description
E0220	Hot water bottle.
E0230	Ice cap or collar
E0238	Non-electric heat pad, moist
K0734	Skin protection wheelchair seat cushion, adjustable, width less than 22 inches, any depth
K0735	Skin protection wheelchair seat cushion, adjustable, width 22 inches or greater, any depth
K0736	Skin protection and positioning wheelchair seat cushion, adjustable, width less than 22 inches, any depth
K0737	Skin protection and positioning wheelchair seat cushion, adjustable, width 22 inches or greater, any depth

How Can I Get the Department/MPA Provider Documents?

To download and print the Department/MPA provider numbered memos and billing instructions, go to the Department/MPA website at: <http://hrsa.dshs.wa.gov> (click the ***Billing Instructions and Numbered Memorandum*** link).